

SCHEDULE CP**Form 725**

41A725CP

Department of Revenue

Kentucky Single Member LLC**Individually Owned****Composite Return Schedule****2006**

Taxable Year Ending

____/____
Mo. Yr.

Taxable period beginning _____, 2006, and ending _____, 200____.

Name of Owner	Name _____	Name _____	Name _____	Name _____
	FEIN _____	FEIN _____	FEIN _____	FEIN _____
Soc. Sec. #	KY Corp. Acct. #	KY Corp. Acct. #	KY Corp. Acct. #	KY Corp. Acct. #
Part I				
Taxable Income Computation				
1. Ordinary income (loss)				
2. Other income (loss) (attach schedule)				
3. Total federal income (loss) (add lines 1 and 2)				
4. Charitable contributions				
5. Other deductions (attach schedule)				
6. Total (line 3 less lines 4 and 5)				
7. Federal depreciation and Section 179 expense deduction from Form 4562				
8. Kentucky depreciation and Section 179 expense deduction from Form 4562				
9. Kentucky statutory differences (KRS 141.010(12) and (13)) (attach schedule)				
10. Kentucky net income (loss) (add lines 6, 7 and 9 less line 8)				
11. Current net operating loss adjustment				
12. Income (loss) after NOL limitation (add lines 10 and 11)				
13. Net income (loss) (amount from line 12 or Schedule A)				
14. Kentucky domestic production activities deduction (KDPAD) ..				
15. Taxable net income (loss) (line 13 less line 14)				
Part II				
Tax Comparison				
1. Regular income tax				
2. Schedule AMC, Section D, line 1				

Part III—Tax Computation

(on reverse)

Name of Owner	Name _____	Name _____	Name _____	Name _____
	FEIN _____	FEIN _____	FEIN _____	FEIN _____
Soc. Sec. #	KY Corp. Acct. #	KY Corp. Acct. #	KY Corp. Acct. #	KY Corp. Acct. #
Part III—Tax Computation				
1. Tax liability (Part II, greater of line 1, line 2 or \$175 minimum)				
2. Recycling/composting equipment tax credit recapture				
3. Total (add lines 1 and 2)				
4. Total tax credits (Schedule TCS)				
5. Net tax liability (greater of line 3 less line 4 or \$175)				
6. Estimated tax payments				
<input type="checkbox"/> Check if Form 2220-K attached				
7. Extension tax payment				
8. Prior year's tax credit				
9. Tax due				
10. Tax overpayment				
11. Credited to 2007				
12. Amount to be refunded				
Part IV—Corporation Income Tax Credit				
1. Tax due (Part III, line 1)				
2. Minimum tax				
3. Corporation income tax credit (line 1 less line 2)				
4. Nonrefundable Kentucky corporation income tax credit (KRS 141.420(3))				
5. Refundable Kentucky corporation income tax credit (KRS 141.420(3)(c))				
Indicate the filing status of LLC. If a nexus consolidation, attach Form 851-N, Schedule KCR (Form 725), and if needed, Schedule KCR-C (Form 725)	<input type="checkbox"/> Nexus Consolidation <input type="checkbox"/> Single Return	<input type="checkbox"/> Nexus Consolidation <input type="checkbox"/> Single Return	<input type="checkbox"/> Nexus Consolidation <input type="checkbox"/> Single Return	<input type="checkbox"/> Nexus Consolidation <input type="checkbox"/> Single Return
TAX PAYMENT SUMMARY				
Tax				
Interest				
Penalty				
TOTAL				
Check Applicable Box	<input type="checkbox"/> Income <input type="checkbox"/> AMC Gross Receipts <input type="checkbox"/> AMC Gross Profits <input type="checkbox"/> Minimum \$175	<input type="checkbox"/> Income <input type="checkbox"/> AMC Gross Receipts <input type="checkbox"/> AMC Gross Profits <input type="checkbox"/> Minimum \$175	<input type="checkbox"/> Income <input type="checkbox"/> AMC Gross Receipts <input type="checkbox"/> AMC Gross Profits <input type="checkbox"/> Minimum \$175	<input type="checkbox"/> Income <input type="checkbox"/> AMC Gross Receipts <input type="checkbox"/> AMC Gross Profits <input type="checkbox"/> Minimum \$175